

ALASKA COUNCIL ON EMERGENCY MEDICAL SERVICES

October 6, 2000

Anchorage

ATTENDANCE

	<u>10/6</u>	<u>10/6</u>
<i>ACEMS MEMBER</i>	<i>A.M.</i>	<i>P.M.</i>
Terry Buness, EMT	X	X
Daniel Cox, EMT	X	X
Don Hudson, DO	X	X
Charles Lean, EMT, Chairman	X	X
Steve O'Connor, MICP	A	A
Karen O'Neill, MD	X	X
Allan Schlicht, MD	X	X
Barbara Simonsen, RN	X	X
Teresa Stone, EMT	X	X
Dorothy Jones	X	X

LIAISON REPRESENTATIVES

Steve Floerchinger, MD, FACS Chair, Committee on Trauma, Alaska Chapter, American College of Surgeons Representative	A	A
Highway Safety Planning Agency, Dept. of Public Safety	A	A
Chuck Foster, Lt. Col., Commander, Rescue Coordination Center	X	A
Robert LaPointe, Division of Emergency Services, Dept. of Military and Veterans Affairs	X	X
Frank Sacco, MD, Dir. of EMS, Dept. of Surgery, Alaska Native Medical Center	X	A

GUESTS:

STATE SECTION OF COMMUNITY HEALTH and EMS STAFF

Mark S. Johnson, Chief, Section of Community Health and EMS, Div. of Public Health, DHSS
Matt Anderson, Manager, EMS Unit, CHEMS Section, Div. of Public Health, DHSS
Martha Moore, Research Analyst, CHEMS Section, Div. of Public Health, DHSS
Shelley K. Owens, Health Program Manager, CHEMS Section, Div. of Public Health, DHSS
Doreen Risley, Health Program Manager, CHEMS Section, Div. of Public Health, DHSS
Zoann Murphy, Admin Clerk, CHEMS Section, Div. of Public Health, DHSS
Mary Krom, Health Program Manager, CHEMS Section, Div. Of Public Health, DHSS

EMS REGIONAL STAFF

Vickie Green, EMS Instructor, Yukon-Kuskokwim Health Corporation
Sue Hecks, EMS Coordinator, Kenai Peninsula, Southern Region EMS Council, Inc.
Daniel Johnson, Executive Director, Interior Region EMS Council, Inc.
Gary Judd, EMS Regional Coordinator, North Slope Borough Fire Dept.
Bobbi Leichty, Executive Director, Southeast Region EMS Council, Inc.
Aggie Lie, EMS Program Manager, Maniilaq Association
Curt Madison, EMS Coordinator, Director of Village Operations, Yukon Kuskokwim Health Corp.
Michael Owens, EMS Director, Norton Sound Health Corporation
Skip Richards, EMS Coordinator, Chugachmiut
Teresa Seybert, EMS Coordinator, Bristol Bay, Southern Region EMS Council, Inc.
Jodi Zufelt, Regional Training Coordinator, Southern Region EMS Council, Inc.

OTHER GUESTS

Phyllis Goodwin, Alaska Disaster Medical Assistance Team (DMAT)
Sue Brogan, Alaska Disaster Medical Assistance Team (DMAT)

Chairman Charles Lean called the meeting of the Governor's Alaska Council on Emergency Medical Services (ACEMS) to order at 9:00 am. A quorum was present. ACEMS member Steven O'Connor was not able to attend the meeting, due to medical reasons.

Chairman Lean reminded the Council members to be aware, and to let him know, of any conflicts of interest that may arise during the meeting.

APPROVAL OF AGENDA

MOTION 1: To adopt the minutes of the April 19-20, 2000 ACEMS meeting.

(Barbara Simonsen, Dan Cox)

ACTION: The motion was approved.

MOTION 2: To adopt the revised agenda of April 20, 2000.

(Terry Stone, Karen O'Neill)

ACTION: The motion was approved.

EXECUTIVE COMMITTEE REPORT

Charles Lean gave the report. The following correspondence was received from:

- Senator Loren Leman asking forgiveness for non-attendance of the board meeting and expressing his appreciation for EMS volunteers. He is a staunch supporter of EMS.
- Senator Robin Taylor asked for ACEMS' priorities for the upcoming session.
- There were several letters from state representatives and senators that were unable to attend the fall 2000 ACEMS meeting.

The following correspondence was sent out from ACEMS:

- A notice about the prehospital vacancy on the ACEMS board went out to Regional and Sub-Region Directors.
- A letter was sent out with the year 2000 Help Along The Way brochures.
- A letter was sent to the Attorney General's office with the third quarter ethics reports.

LIAISON, COMMITTEE, TASK FORCE, and PROGRAM REPORTS

Dr. Frank Sacco from the **Alaska Native Medical Center (ANMC)** reported that the Center has spoken about the transition that the Indian Health Service (IHS) has been going through since January 1999. He was not sure how things were going to develop within the consortium, but has found that there is a continued commitment to EMS training. Unfortunately, there is no more money, but there is administrative support for continuing training programs such as Advanced Trauma Life Support (ATLS) and the Trauma Nursing course, which will continue. Due to the success of ATLS training, they now have more providers that need to be recertified; these recertification courses will be less resource-intensive. The first course will be in the spring of 2001. Next fall, there will be a full ATLS course in conjunction with the bush doctors meeting as a continuing education track. New activities include: the Emergency Medical Services for Children grant has sponsored an emergency nursing pediatric course that some ANMC nurses have put together. They will be taking that course out to the villages and rural hospitals. Another program is trying to get the Emergency Trauma Technician (ETT) program established in the high schools. This has had limited success throughout the state. They now have a commitment from the Anchorage school district, and will start a class in Chugiak high school. They want to put together materials for communities to use as a template for ETT courses, and

will be working with the state to get more instructors out to the villages. IHS trauma systems development is still a priority:

1. Making sure that facilities and personnel are trained. ANMC is a Level II trauma center, and is interested in getting other hospitals designated as Level IV trauma centers (Yukon-Kuskokwim and Nome). Nome just went through its JCHO review.
2. The consortium and tribal areas will be taking a hard look at the current medevac systems; this look was precipitated by financial difficulties. The consortium is looking at what the system should be and what to expect from a medevac system. Mike Owens will be involved in this process.

Personnel involved in the Alaska Disaster Medical Assistance Team (DMAT) have done very well. It is currently the only cold weather team available for disaster response.

Discussion followed on the ETT training program, nurse staffing shortages leading to possible unnecessary medevacs and hospital diversions, and the potential for problems in disasters if there is a staff shortage at a hospital.

Matt Anderson reported that there is a pilot program for ETT in the high school being funded at three high schools around the state. Kathy Griffin now has a program put together to do ETT in high schools. The state is looking at changing requirements for instructors to allow for more availability.

Charlie Lean mentioned that he is concerned about possible fragmentation of the IHS. Dr. Sacco said that they were still seeing how things are being sorted out. The former IHS hospitals will be sticking together as a system, the relationships between hospitals have not deteriorated. The relationship with infrastructure such as telemedicine, etc. will continue to evolve.

Bob LaPointe from the **Alaska Department of Emergency Services (ADES)** distributed a written report to ACEMS. He has become the Weapons of Mass Destruction (WMD) coordinator for the state. He discussed the need for additional staff in ADES, due to numerous demands currently being made on the staff. WMD activities are increasing.

Charlie Lean reported that he had been a recipient of salmon during the relief effort. He also mentioned that Shishmaref is almost in disaster status due to erosion coming very close to a main power line.

Highway Safety Planning Report: Shelley Owens believes that Kevin O'Sullivan will be filling Romaine Kareen's position. Shelley did not receive a written report from the Highway Safety Office.

Rescue Coordination Center (RCC): Lt. Col. Charles Foster distributed an operations report on the RCC. Discussion followed on the new Blackhawk helicopters in Alaska, their capabilities and drawbacks. The helicopters will be located in Anchorage, Bethel, Nome, and Juneau. There was additional discussion on the issue of RCC vs. civilian asset response to rescues. Lt. Col. Foster mentioned that the RCC does not always look for civilian assets because of the assumption that the originator of the call has already checked on civilian availability. The military doesn't want to take business away from commercial enterprises. Civilian medevacs are not the priority of the guard. If an inappropriate transport is reported to the RCC, it is discussed with the crew but not the medical providers. Discussion followed on the need to have a statewide reporting procedure to both the military and medical providers in place for future inappropriate transport authorizations.

BREAK

There was a break at 10:28am.

The meeting reconvened at 10:46am

LIAISON, COMMITTEE, TASK FORCE, and PROGRAM REPORTS - continued

EMS Program Report: Matt Anderson reported that the CHEMS office was reorganized over the summer with injury prevention activities moving into the EMS unit under Martha Moore's very capable direction. Big initiatives in the department, such as Emergency Medical Services for Children (EMSC), continue to go along very well.

The Code Blue project was started two years ago as an attempt to quantify the needs of rural EMS. It started as a "System in Crisis" paper, a list of training essentials, equipment needs, and communications needs; the total list was about \$7 million. Code Blue presented not only the need, but also distribution and prioritizing of needs. We have been fortunate that EMS throughout the state has the reputation of being very efficient. Lt. Gov. Fran Ulmer and Kevin Ritchie are trying to help get it funded. The Denali Commission has made Code Blue a favorite project and is trying to help find funding sources such as the Department of Agriculture (USDA). We now have a database system in place to put in equipment requests and figure out matching amounts for potential USDA funding. The USDA has been very helpful in making the system understandable and accessible. With the USDA funding comes a need to find matching funds. One source for those funds is the Rasmuson Foundation, based in Anchorage. The Rasmuson Foundation funding period closed on October 1st. Matt said that the Regional Directors put in some very creditable applications after much work behind the scenes. There will be additional refinements of the Code Blue database in the future, and the staff will keep you posted.

The CHEMS office has been doing a lot of grant writing and Doreen has had great success. The EMSC project is going well, as is the new poison control operations.

CHEMS has revised its website completely. Matt believes the site is much more capable of providing information. We have added as a resource, the interactive database for certification checks.

Upcoming work includes the revision of the EMS Goals Document, targeting summer 2001 for releasing an updated version. Matt asked everyone to take a look at the document and get information about areas to be improved or added to the staff.

CHEMS has been very successful in getting funds for bioterrorism activities.

Other activities are being done under contract and we will be using this mode increasingly due to staff levels. The model standing orders were drafted by Rob Janik and reviewed by Dr. Dull; his comments will be incorporated into the model standing orders, and we hope to have them ready to be distributed for symposium.

ETT course in the high school program: Letters of Solicitation have been done to put together a model curriculum for the ETT bridge course. The contract will call for pilot testing the course in spring 2001.

Another Letter of Solicitation deals with putting together an attrition survey on volunteer retention. The contract will include drafting the survey and compiling survey data. That data will hopefully feedback into the training process and will help find ways to keep volunteers longer.

A contract that will allow CHEMS to contract with a private attorney to help us with the rewriting of the Regulations should help us to keep the regulations current. We need to look at impediments to training and certification.

One potential solution to the current difficulties about financial issues in the regions is ambulance service billing. In order to help services bill better, we are putting the billing services manual under contract. Matt asked if we should try centralized billing in the state. There is a need to put these resources out quickly as the Medicare reimbursements will be changing in 2001. There will be a two-day Billing Workshop in January in Anchorage to discuss billing issues. This workshop will target agencies that are considering, as well as agencies that are currently doing, billing. We are hoping for a good cross-section of attendees, hospitals included. While we probably won't have the funds to bring people in, we will be making the billing resource manual available as soon as possible, as well as videotaping workshop sessions. This letter of solicitation is out now.

Matt reported that there were two Technical Assistance Team (TAT) visits this year: one to the Copper River area and one to Prince of Wales Island. The Prince of Wales trip was a wonderful experience and the TAT team learned how important feedback is to providers and first responders. There is a need for good feedback from the hospital back to the first responder on the scene. It would be useful to put together an example of a patient feedback system that could be used in various hospitals throughout the state. Some hospitals are very cooperative with feedback, but some are not. We want to give them a way to implement the model feedback system. It should be in place by the end of the year.

CHEMS is doing a videophone project which is placing phones in rural clinics to allow for more physician-CHA interaction. CHEMS is also working with the Alaska Federal Health Care Access Network (AFHCAN) program to get videophone equipment into smaller areas.

We are hoping that the new state EMS Training Coordinator will be hired during this fiscal year.

Injury prevention programs in Anchorage: Mary Krom is working with the smoke alarm installation project. Based on a study done in Kotzebue relating to smoke alarms in small places that found that photoelectric smoke alarm systems are much more likely to stay in place and be useful, they are now installing smoke alarms in limited-income areas, specifically mobile homes, in Anchorage. The project has installed approximately 300 smoke alarms with 5-year lithium batteries. The program uses volunteers to do the installations, and they are hoping to visit over 800 homes during the upcoming weekend, and are planning on installing 250-300 smoke alarms. The program has 1000 alarms to distribute. The program is also partnering with the Anchorage weatherization program and giving them smoke alarms to install during the weatherization process. There is a six-month follow-up plan.

CHEMS Section Report: Mark Johnson informed ACEMS that in the reorganized CHEMS section there are now three main units: EMS/Injury Prevention, Health Promotion, and Primary Care/Rural Health.

Health Promotion deals with cardiovascular health issues and tobacco prevention and control. There are a lot of activities happening with tobacco prevention and control. Larry Bussone, of the administrative unit, is involved in tobacco enforcement through the SYNAR regulations; they are using high school students for sting-type operations.

Primary Care/Rural Health (PC/RH) is working with the Rural Hospital Flexibility Program (RHFP). The RHFP helps rural hospitals stay economically viable and targets primary care and EMS. PC/RH is also working with the Denali Commission, which is helping to fund rural health clinics. Prioritizing and designing these clinics is now in progress. One of the models they looked at for designing these clinics was the EMS Goals document.

The Behavioral Risk Factor Surveillance Survey (BRFSS) is a telephone survey on health habits and behaviors. It collects statistical data for behaviors to target prevention activities. CDC wants to expand the BRFSS program.

Bioterrorism: Matt and Lisa Harlamert are working with the state bioterrorism team.

Health telemedicine: Lisa Harlamert and Anthony Zenk are the CHEMS staff involved in many of the new telemedicine programs being developed.

Poison Control: CHEMS will be hiring a Poison Control Specialist to work on this issue.

CHEMS is getting more responsibilities and the section is growing. The Anchorage offices will be moving into the Frontier building, probably in January.

EMS Communications is still a big issue. Dan Johnson got the money back on the Iridium phones. The Iridium system is still a possibility; it is a better solution for some of our remote communications needs. The Global Star phone system does not cover as much of the state; it does work well for Southeast Region.

The report "Healthy People 2010" is the Statewide Health Planning Program document and CHEMS is involved in writing chapters for that document.

Mark represents the Commissioner on the Disaster Policy Cabinet and is on the State Emergency Response Commission (SERC).

A discussion ensued on the possible diversion of CHEMS staff from EMS projects to non-EMS responsibilities. Mark and Matt reassured ACEMS that no EMS staff has been made responsible for non-EMS projects. The new grants are not diverting staff from EMS responsibilities.

Emergency Medical Services for Children: Doreen Risley distributed a written report, an EMSC program update sheet, and a Poison Control Center Planning paper. She is working on putting together a task force and hiring personnel to coordinate the new Poison Control program.

BREAK

Break for lunch. Charlie reminded the members that the meeting would start promptly at 1pm. The meeting was reconvened at 1pm.

LIAISON, COMMITTEE, TASK FORCE, and PROGRAM REPORTS - continued

Training Committee: Jodi Zufelt gave the report for Steve O'Connor. Thanks to Dillingham for hosting the training committee meeting in August. Jodi said that the committee has talked about the RHFP regulations and the attorney issues. The training committee will be going over all the regulations to discuss needed changes. Jodi mentioned to ACEMS that if members know of sites which might need TAT reviews, please ask the committee. The next meeting will be in Anchorage, sometime in January. A training committee subcommittee worked on reviewing the skills sheets, practical exams and tests. The new products will be available, revamped and reviewed by Jan 1, 2001. Discussion followed on the definition and funding for TAT reviews. Matt said that the EMSC and RHFP programs are sources of funding. Matt also wanted to express his gratitude to the regions for allowing the training staff the time to attend these training committee meetings and to work on the skills sheet revisions.

Public Information & Education Committee: Skip Johnson gave the report.

1. Symposia – the PI&E has added an information booth with posters to give an overview of ACEMS. This year, the committee will put together information, working with the state

office, to show where all the ambulance and first responders are located in the state. The committee also wants a map of current EMS providers in Alaska. Such a list will validate where responders are located, and let them know that Alaska's EMS providers are appreciated. Thanks to Gary Judd for his help in getting these projects done. The committee wants to extend this information to the other symposia in the state. The committee also wants to get pictures of Alaska EMS squads and will be sending out cameras to get pictures.

2. EMS Day at the Legislature – The Regional Directors and EMS Coordinators have been going to Juneau to do education on EMS programs in Alaska. The committee feels that this is very important to keep the EMS program in the eye of the legislature. Southeast Region's symposium has changed its dates to April 19-21, 2001. Skip will be working on the most appropriate day for the Legislature event.
3. The PI&E committee is asking for direction from ACEMS on the ACEMS brochure. Do we need to do one? Is it effective? Does it reach the target audience? Replacing the brochure with a small pamphlet with biographies and pictures of personnel might be more effective. The brochure is traditionally handed out at the symposia and at the EMS Day at the Legislature.
4. Comfort One – there are some problems getting information to people who might be able to make a difference with this program. The Comfort One information is on the CHEMS website, and there is an educational component tailored to hospitals, senior citizens, etc. The committee feels the need is to get the information to discharge personnel in hospitals, and to people who have contact with citizens who need that information. Social services should also be involved and brought up to speed on Comfort One.
5. During the strategic planning session, we were trying to come up with a vision statement; thinking of some way to tap into a larger source of people. The idea of a statewide contest to come up with a bumper sticker-type of a slogan for EMS was discussed.

The PI&E committee can take a higher profile on what needs to be done to support EMS in Alaska. It will work with the new marketing ideas and needs to determine who will be involved in these projects. PI&E has no budget to work with and that makes it difficult to do things that require funding. The brochure is estimated at \$100-150 per year. Also, the PI&E committee is shrinking in numbers and needs some new members.

Action on PI&E items will be held until after other committees have finished their reports.

Trauma Registry: Martha Moore reported that all of the 1999 data is complete but for one hospital. The program continues to improve in being current in data collection. There have been 61 requests for information from the very popular trauma registry. The requests are from: injury prevention agencies, media, legislators, EMS instructors, and researchers. Some of the requests have been for: snow machine injuries and deaths; suicide attempts and suicides; alcohol-related injuries; child abuse; firearm injuries (Mark wrote a paper that has gotten attention both in and out of state on firearms as one of the leading causes of death for children in Alaska); dog bite injuries; and wolf injuries (the recent wolf bite is the only documented case in decades, but it was a good opportunity to talk about dog bite injuries). The Trauma Registry Review Committee meeting was held on Monday, October 2, 2000. Discussed confidentiality issues and releasing information from the registry. The question is how to get information out to people who need it, but protect the confidentiality of patients, hospitals, and providers. Diane Saltee resigned, and instead of replacing her, the office has had contracts to pick up some of her responsibilities. The trauma registry will not continue to use the software program that has been used for the past 12

years; that program was not meeting the needs of the trauma registry. After reviewing five different vendors, the decision was made to purchase Collector, a software package from Digital Innovations.

Martha mentioned the desire to create hospital reports that will be appropriate for the rural hospitals. Current reports are more conducive to the larger hospitals, but she is hoping to develop more reports meaningful to the smaller hospitals.

Medical Directors Report: Scott Dull was unable to be present. Shelley distributed a summary of State Medical Director Activities. Dr. Dull had asked Charlie Lean to read a letter on his behalf. Copies of the letter were distributed to ACEMS.

Action on Dr. Dull's requests will be held until after other committees have finished their reports.

Regional EMS Directors/Coordinators: Gary Judd reported that the group met on Monday, October 2, 2000. Most of the group also attended the strategic planning meetings on Wednesday and Thursday. Matt gave a report on the state of the State. The group discussed what is going on in the Yukon-Kuskokwim to revitalize EMS in that region. The directors and coordinators came away with more ideas of how to recruit and retain volunteers. Bobbi gave a rundown on Global Star phones. The dates of the Interior Symposium are May 17-20, 2001; Southeast's Symposium will be in April.

The directors and coordinators will be submitting a letter to the Municipal League and the tax cap initiative people saying that they do not support the tax cap initiative.

Funding strategies are still in the preliminary stages; the group is trying to look for alternative funding sources. The goal is to make EMS autonomous and funded.

OLD BUSINESS

Strategic Planning Session: Charlie Lean was disappointed in the low attendance, but wanted to thank all who were there. He thinks that strategic planning is a major role of ACEMS and an important part of what ACEMS is. While the outcome was less complete than had been hoped, we did come out with some major goals set and some good assignments for task forces and groups.

- Planning committee: communications and process.
- Training committee: education and training issues.
- PI&E committee: recruitment, marketing, and a new state EMS slogan.
- Funding committee: new funding ideas and how to pursue those ideas.
- Injury Prevention: will be a task force, much less structured than the formal ACEMS committees.

ACEMS members need to plan on participating in more than one committee now. Shelley distributed the current committee membership lists. Matt commented on some of the activities of the Strategic Planning Session and said that a final report would be distributed by the end of the month.

MOTION 3: To recreate the Funding committee, develop an ad hoc Injury Prevention committee and establish those categories described above as being the duties of the ACEMS committees.

(Barbara Simonsen, Terry Stone)

ACTION: The motion was approved.

Discussion followed on appointments to the committees. Final committee membership list will be distributed by the end of the month. Charlie reminded the members that now that the goals have been set, there needs to be objectives and action plans describing how these goals will be pursued. The first step is to get the action plans together in the next two months. Matt wants to be sure that the committees continue the forward momentum that is begun at the ACEMS meetings. Gary Judd said that the PI&E committee is going to attempt the first online meeting to see if that is a viable alternative to the conference call method.

MOTION 4: That the new ACEMS committees have action plans to the CHEMS office by December 1, 2000.

(Karen O'Neill, Barb Simonsen)

ACTION: The motion was approved.

Discussion followed on the use of the action plans. Will these plans be put together and then submitted to ACEMS for approval as three-year goals? Matt thinks that the group should develop the goals and objectives, and then have an ACEMS teleconference to discuss the issues. He warned the committees that there would not be money available to do big projects. Barb mentioned the need to have goals for the state to be available for the grant applications in the spring. ACEMS should prioritize the goals as soon as possible. There will be a teleconference on this issue by December 20, 2000. Matt distributed examples of the action plans that are required to be to the state office by December 1, 2000.

There was discussion on the ACEMS brochure updating process. The recommendation was made not to spend any more money on a fancy brochure. It was also suggested that future updates be put on the CHEMS website. There is a need to distribute the brochure at symposium and at EMS Day at the Legislature. Matt said there is money available for a small printing.

MOTION 5: To do a quick update of the ACEMS brochure for symposium, nothing too fancy.

(Dan Cox, Don Hudson)

ACTION: The motion was approved.

The Comfort One program was discussed. Barb suggested that someone work on disseminating Comfort One information for hospitals, discharge planners, and primary care physicians. Don Hudson would be glad to work on this issue. Jodi mentioned that she would be willing to take a PowerPoint presentation out to physician offices.

MOTION 6: To table action on the Comfort One program information dissemination until the next ACEMS meeting.

(Dan Cox, Don Hudson)

ACTION: The motion was approved.

BREAK

There was a break at 2:20pm.

The meeting reconvened at 2:30pm.

NEW BUSINESS

A calendar of upcoming events for 2001 was posted:

January: Billing workshop – specific date to be announced.

March: EMS Day at the Legislature – specific date to be announced.

April: ACEMS Spring meeting.

 ACEMS Training committee meeting – specific date to be announced.

 SEREMS Symposium, April 19-21.

 SEREMS Board Meeting, April 22-23.

May: 5/17-20 IREMISC FBX symposium.

Phyllis Goodwin and Sue Brogan from the Alaskan DMAT team gave a PowerPoint presentation on DMAT and distributed slide handouts and business cards. Discussion followed on the role of the team in Alaska, funding sources, and will the team departure leave Alaska under-staffed in terms of medical providers. If the team is deployed on a federal request, members are reimbursed. The team will not leave the state under-staffed. The team is set up for patient care. Team does not travel with patients, but will provide medical stability until medevac team arrives. The deployment is configured for pallet drops. Help is always needed.

OLD BUSINESS - continued

Shelley distributed information on the status of ACEMS members. Terry Buness' and Terry Stone's terms have been expired for a year. Dorothy Jones', Steve O'Connor's, and Allan Schlicht's terms are about to expire. Dorothy will be retiring. Allan will let ACEMS know.

MOTION 7: That ACEMS support Steve O'Connor and Allan Schlicht if they wish to continue as ACEMS members.

(Barb Simonsen, Dan Cox)

ACTION: The motion was approved.

Charlie informed the members that the chair, vice chair, and officer at large positions are up for review.

MOTION 8: If all three existing officers have no objections, that they continue in their positions.

(Terry Buness, Don Hudson)

Matt mentioned that it takes some time to replace ACEMS board members. It is believed that Steve O'Connor would like to continue as vice chair.

ACTION: With the amendment that the expiration dates for the officers will be in October 2002, and that elections for new officers will occur at that time, the motion was approved.

NEW BUSINESS - continued

Robert LaPointe from ADES gave a report on **Bioterrorism and Public Health**. This is a low probability but extremely high impact event. Bioterrorism includes chemical, biological, and nuclear attacks, as well as truck-bomb type of events. An overt type of attack will have a quick response. The medical community is concerned about chemical or biological attacks, because there is no central event. There is no system to correlate information from dispersed locations. It is a Congressional belief that there will be a chem/bio attack in this country within the next five years.

In Alaska, FEMA has provided funds to pay a contractor to meet with the Kenai, Juneau, Matanuska-Susitna, Fairbanks, and Kodiak boroughs. Other boroughs were offered the opportunity to participate, but since the probability of attack is so low in those areas, they declined. The plan will be completed within the next six months, and will be a state model plan for other communities to use as a template. There is a national pharmaceutical stockpile available and ready to deploy in the event of a chem/bio incident. The Department of Justice has a grant to provide individual responders with equipment. Alaska is projected to get \$1.2 million to purchase specific equipment for Level C hazmat gear. Most of the cities have Level A hazmat teams, and that team's equipment can be used for chem/bio incident. Hospitals and clinics will provide equipment to give protection for casualty care and will purchase decontamination equipment also. The WMD task force will then decide which first responders will get this equipment and what type of equipment to purchase, because there isn't enough money to disperse throughout the state. There are two options that the task force will consider:

1. Have a small amount of equipment everywhere.
2. Centralize equipment in two or three locations, train many people in its use, and then deploy teams to area where an event occurs.

There are OSHA, training, and continuing education issues to consider as well. Bob said that the definition of first responders covers from the incident area to the hospitals.

There is a National Guard team at Fort Richardson, under the Governor's control, whose full time mission is WMD. They have portable labs and communications abilities and are fully stocked to respond to a WMD event. The team will be fully operational in four to six months. Teams throughout the United States work within the Incident Command system, so are able to integrate with local responders. Questions and discussion followed. Charlie thanked Bob for his presentation.

The RHFP and data collection reports were deferred. Information will be sent out in written form.

Charlie opened the floor to nominations for the three seats on the bylaws committee. Barb nominated Don Hudson and Charlie Lean. Terry Bunes nominated Terry Stone.

MOTION 9: That nominations for the bylaws committee be closed.

(Barb Simonsen, Terry Bunes)

ACTION: The motion was approved.

The Bylaws Committee members will be Don Hudson, Charlie Lean, and Terry Stone.

MOTION 10: To increase symposium clinical track fees.

(Karen O'Neill, Don Hudson)

Discussion on need for increased fees, student fees to be included in increase, and limiting fee raises to the 2001 symposium.

ACTION: With the amendments that the student fees would be included in the increase, and that the fee raise would be limited to the 2001 symposium, the motion was approved.

Discussion on dates for the spring 2001 ACEMS meeting.

The meeting will be held from April 23-25, 2001 in Juneau. The task force meetings will be Monday, April 23 and in the morning on Tuesday, April 24. ACEMS will meet Tuesday afternoon, April 24, and Wednesday morning, April 25. Proposal Evaluation Committee will meet Wednesday afternoon, April 25.

Matt asked for ACEMS assistance at activities during the upcoming symposium. Terry Stone, Barb Simonsen, Don Hudson, Charlie Lean, Dan Cox, and possibly Dorothy Jones will be attending the symposium. The banquet is on Saturday, November 11. Matt asked that ACEMS members please be there to help give out awards, etc.

ADJOURNMENT

The meeting was adjourned to Executive Session at 3:52pm.